



CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR PUBLIC HEALTH

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Audrey Tayse Haynes  
Secretary

Date: January 30, 2015

**Due February 13, 2015**

To: All Kentucky Vaccine Providers (except hospitals)

From: Laura Harrod, MS Ed   
Kentucky Vaccine Accountability Section (VAS) Coordinator

Subject: Pre-Booking Vaccines for Children (VFC) Influenza Vaccines for 2015-2016 Season

**Centers for Disease Control and Prevention (CDC) requires VFC providers to pre-book 2015-2016 VFC influenza vaccine by February 13, 2015.**

In order to adequately order and supply influenza vaccine to providers, VAS relies upon your pre-book information. **Every VFC provider must pre-book their influenza vaccine order for the 2015-2016 influenza season now.**

**Providers who pre-book by the due date of February 13<sup>th</sup> will receive their vaccine order as VAS obtains the 2015-2016 influenza vaccine allocations. Vaccine will be delivered in partial shipments until your full order is met. Submit the order form below to pre-book influenza vaccine for VFC-eligible children through 18 years of age in your practice. These influenza doses may *ONLY be used for VFC-eligible and KCHIP eligible children*. No VFC vaccine doses may be given to any other patients, particularly those patients with private insurance.**

**Providers who do not pre-book should expect delays in receiving influenza vaccines for the 2015-2016 season, as compared to VFC providers who pre-book by the above stated deadline.**

**Also, the quantity available and/or formulation of influenza vaccine cannot be guaranteed. VAS will estimate the brand and number of doses needed for your practice based upon your order form. Please realize, if VAS allocates its entire influenza vaccine stock, the program may not be able to obtain additional vaccine from the Centers for Disease Control and Prevention (CDC) until later in the influenza season (possibly December 2015).**

KVP cannot guarantee timing of vaccine shipments. According to CDC, the additional steps required for VFC vaccine distribution adds a minimum of 2 ½ weeks to distribution time, compared to private sector influenza vaccine released at the same time. Due to possible early shipment, your office should be open to receive vaccine deliveries during normal shipping hours beginning July 2015. KVP does not call when shipments are released to provider's offices. Lost influenza shipments may not be replaced if supply is not adequate.



**Annual influenza vaccination is recommended by CDC for EVERYONE aged 6 months and older.**  
You should request vaccine based upon your *reasonable expectation* of doses that will be used.

**When calculating orders:** Children aged 6 months through 8 years receiving flu vaccine for the first time should receive two doses at least one month apart; children aged 6 months through 8 years vaccinated for the first time in the 2014-15 season, but who received only one dose, should receive two doses in 2015-16. All others need one dose of vaccine. This is subject to change pending release of ACIP's 2015-2016 recommendations for seasonal influenza vaccination.

**Complete the vaccine request form (submit by February 13, 2015):** The CDC has not released the presentations or formulations at this time, thus the options listed below may or may not be available. Several influenza vaccine brands have received FDA approval for a quadrivalent formulation. For the 2015-2016 season, KVP plans to only purchase quadrivalent formulation. Use this information to determine your order of injectable and nasal spray formulations on the vaccine request form. **Consider your vaccine storage space when you order!** Pre-filled syringes (PFS) require 5-10 times the amount of storage space as the same number of doses in multi-dose vials (MDVs).

**Inactivated vaccine (injectable) options:**

1. 6 months through 18 years of age: Fluzone® MDV: (Sanofi Pasteur, Inc.)
2. 6 months through 35 months of age: Fluzone® preservative-free 0.25 mL PFS (Sanofi Pasteur, Inc.)
3. 36 months through 18 years of age: Fluzone® preservative-free 0.5 mL PFS (Sanofi Pasteur, Inc.)
4. 3 years through 18 years of age: FLUARIX® preservative-free 0.5 mL in 0.5 mL PFS (GlaxoSmithKline Biologicals)
5. 3 years through 18 years of age: FluLaval® MDV: (GlaxoSmithKline Biologicals)

**Live Attenuated Intranasal Vaccine (LAIV)**

6. 24 months through 18 years of age (healthy, not pregnant), preservative-free: FluMist® (MedImmune, LLC)

If you have questions regarding pre-booking seasonal influenza vaccine through VAS, please contact:

Ida Taylor at 502-564-4478 ext. 4268 or by email at [Ida.Taylor@ky.gov](mailto:Ida.Taylor@ky.gov) (coordinates influenza orders)  
Clarissa Goode at 502-564-4478 ext. 4267 or by e-mail at [Clarissa.Goode@ky.gov](mailto:Clarissa.Goode@ky.gov) (coordinates D, 100, 200, and CC PINs.)  
Rita Lathrem at 502-564-4478 ext. 4258 or by e-mail at [Rita.Lathrem@ky.gov](mailto:Rita.Lathrem@ky.gov). (coordinates H, OP, SC, FQ and RH PINs.)  
Jane Payne at 502-564-4478 ext. 4252 or by e-mail at [Jane.Payne@ky.gov](mailto:Jane.Payne@ky.gov)  
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Lee Ann Guice  
Lucy Senters

**Kentucky Vaccine Accountability Section (VAS)**  
**2015-2016 Season Influenza Vaccine Pre-Book Form**

VFC PIN#: \_\_\_\_\_ Date: \_\_\_\_\_

Provider Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Person Completing Order (print): \_\_\_\_\_

Address: \_\_\_\_\_

<b>Formulations* and # of Doses:</b> <i>MDV = multi-dose vial, PFS prefilled syringe</i>	<b>Influenza Vaccine Brands</b>
<b>Indicate number of doses of each formulation (round to nearest 10).</b> Note: If we are unable to pre-book the brand listed, we will substitute a different brand's equivalent formulation.	
<b>6 months through 18 years of age MDV</b> Non-High Risk Doses _____ High Risk Doses _____	<b>Fluzone MDV (Sanofi Pasteur) inactivated vaccine (injectable)</b>
<b>6 months through 35 months only 0.25 mL PFS</b> Non-High Risk Doses _____ High Risk Doses _____	<b>Fluzone (Sanofi Pasteur) inactivated vaccine (injectable)</b>
<b>36 months through 18 years of age 0.5 mL PFS</b> Non-High Risk Doses _____ High Risk Doses _____	<b>Fluzone (Sanofi Pasteur) inactivated vaccine (injectable)</b>
<b>3 years through 18 years of age MDV</b> Non-High Risk Doses _____ High Risk Doses _____	<b>FLULAVAL (GSK)</b> inactivated vaccine (injectable)
<b>3 years through 18 years of age 0.5 mL PFS</b> Non-High Risk Doses _____ High Risk Doses _____	<b>FLUARIX (GSK)</b> inactivated vaccine (injectable)
<b>2 years through 18 years of age Nasal Sprayer</b> Total Doses _____ <i>* recipients must be healthy, not pregnant</i>	<b>FluMist (MedImmune)</b>

\*Pre-filled syringe (PFS) and LAIV (FluMist) formulations are preservative-free, and require at least five times more storage space than equivalent number of doses in multi-dose vials (MDV). Each MDV contains 10 doses of 0.5 mL size.

**Save a copy of your request for your files:** unless otherwise informed, you will receive what you order automatically in several shipments this fall as vaccine arrives at the distributor. Because of manufacturing differences, the preservative free vaccines came in later than the multi dose vials.

Please fax this form to (502) 696-4923 by **February 13, 2015**. Or email to [dph.kvp@ky.gov](mailto:dph.kvp@ky.gov). (You can also put a "request a read receipt" option on the email to make sure we received the form if you use this email box.)